

DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION

☐ Declaration Submitted with Initial Filing **OR** ☒ Declaration submitted after Initial Filing

Attorney Docket Number 1999-0725

First Named Inventor Michael Donkin

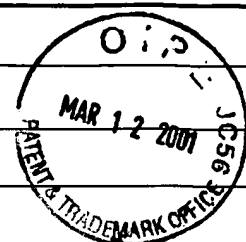
COMPLETE IF KNOWN

Application Number 09/680940

Filing Date 10/10/2000

Group Art Unit 2133

Examiner Name



As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

System And Method For Managing Dial Platform Configuration

(Title of Invention)

the specification of which

☐ is attached hereto

OR

☒ was filed on 10/10/2000 as United States Application Number or PCT International Application Number 09/680940 and was amended on (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in Title 37 Code of Federal Regulations, § 1.56.

I hereby claim foreign priority benefits under Title 35, United States Code § 119 (a)-(d) or § 365(b) of any foreign application(s) for patent or inventor's certificate, or § 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of an application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) below.

Application Number(s)	Filing Date(MM/DD/YYYY)	
		<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto

SEND TO: Assistant Commissioner for Patents, Box Patent Application, Washington, D.C. 20231

DECLARATION - Utility or Design Patent Application

I hereby claim the benefit under 35 U.S.C. 120 of any United States application(s), or 365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of 35 U.S.C. 112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 C.F.R. 1.56 which became available between the filing date of the prior application and the national or PCT International filing date of this application.

U.S. Parent Application or PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)

☐ Additional U.S. or PCT International application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

As a named inventor, I hereby appoint the following registered practitioner(s) with full power of substitution and revocation, to prosecute this application, to make alterations and amendments therein, to receive the patent, and to transact all business in the Patent and Trademark Office connected therewith:

☐ Customer Number

Place Customer Number Bar Code Label here

OR

☒ Registered practitioner(s) name/registration number listed below

Name	Registration Number	Name	Registration Number
CANAVAN, Robert T.	37592	CONOVER, Michele L.	34962
DELACRUZ, Cedric G	36498	DWORETSKY, Samuel H.	27873
GARG, Rohini K	45272	GORRIE, Gregory J.	36530
ISAACSON, Thomas M.	44166	LEE, Benjamin S.	42787
LEVY, Robert B.	28234	MCGAHAN, Susan E.	35948

☒ I also appoint the following additional registered practitioner(s) named on the Registered Practitioner Information (Supplemental Sheet) (PTO/SB/02C modified by AT&T Corp.) attached hereto with full power of substitution and revocation, to prosecute this application, to make alterations and amendments therein, to receive the patent, and to transact all business in the Patent and Trademark Office connected therewith.

Direct all Correspondence to:

☐ Customer Number or Bar Code Label

(Insert Customer No. or Attach bar code label here)

or ☒ Correspondence address below

NAME	Samuel H. Dworesky				
ADDRESS	AT&T CORP. P.O. Box 4110				
CITY	Middletown	STATE	New Jersey	ZIP CODE	07748-4110
COUNTRY	United States of America			FAX	732-368-6932

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of Sole or First Inventor		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Name	Michael Donkin		
Signature		Date	
Citizenship	United States		
Address (line 1)	8 Derringer Drive		
Address (line 2)	Howell		
Address (line 3)	Monmouth County		
Address (line 4)	New Jersey		
Address (line 5)	USA		
Zip Code	07731		

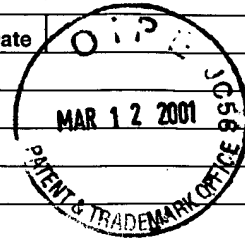
☒ Additional Inventors are being named on the 1 separately numbered sheets attached hereto

SEND TO: Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231

DECLARATION**ADDITIONAL INVENTOR(S)**

Suppl m ntal Sh et

Pag of

Name of Additional Joint Inv nt r, if any:☐ A petition has been filed for this unsigned inventor**Name** Jared Helm**Signature****Date****Citizenship** United States**Address (line 1)** 3408 Marquette Drive**Address (line 2)** High Ridge**Address (line 3)** Jefferson County**Address (line 4)** Missouri**Address (line 5)** USA**Zip Code** 63049**Nam f Additional Joint Inventor, if any:**☐ A petition has been filed for this unsigned inventor**Name** Ken C. Snyder**Signature****Date****Citizenship** United States**Address (line 1)** 426 S. Holmes Avenue**Address (line 2)** Oakland**Address (line 3)** St. Louis County**Address (line 4)** Missouri**Address (line 5)** USA**Zip Code** 63122**Nam of Additional Joint Inventor, if any:**☐ A petition has been filed for this unsigned inventor**Name** Joseph M. Tompkins**Signature****Date****Citizenship** United States**Address (line 1)** 33 Nob Circle**Address (line 2)** Newburgh**Address (line 3)** Orange County**Address (line 4)** New York**Address (line 5)** USA**Zip Code** 12550**Nam of Additional Joint Inventor, if any:**☐ A petition has been filed for this unsigned inventor**Name** Virginia E. Weismantel**Signature** *Virginia E. Weismantel***Date** 1/17/01**Citizenship** United States**Address (line 1)** 22 Valley Road**Address (line 2)** Ringwood**Address (line 3)** Passaic County**Address (line 4)** New Jersey**Address (line 5)** USA**Zip Code** 07456-2909

SEND TO: Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231

Additional Foreign Applications:

[illegible]**Application Number(s)**

Filing Date(MM/DD/YYYY)

--	--

**U.S. Parent Application or PCT Parent
Number**

Parent Filing Date
(MM/DD/YYYY)

Parent Patent Number
(if applicable)

--	--	--

SEND TO: Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231

DECLARATION

Registered Practitioner
Information
(Supplemental Sheet)

Name	Registration Number	Name	Registration Number
MONKA, Gary H.	35290	NAVON, Jeffrey M	32711
RESTAINO, Thomas A.	33444	STEINMETZ, Alfred G.	22971
SZWERC, Christine	43177		



SEND TO: Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231

DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION

☐ Declaration Submitted with Initial Filing **OR** ☒ Declaration submitted after Initial Filing

Attorney Docket Number 1999-0725

First Named Inventor Michael Donkin

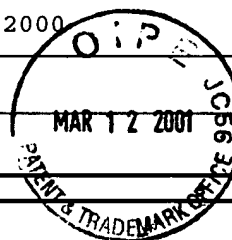
COMPLETE IF KNOWN

Application Number 09/680940

Filing Date 10/10/2000

Group Art Unit 2133

Examiner Name



As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name. I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

System And Method For Managing Dial Platform Configuration

(Title of Invention)

the specification of which

☐ is attached hereto

OR

☒ was filed on 10/10/2000 as United States Application Number or PCT International Application Number 09/680940 and was amended on (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in Title 37 Code of Federal Regulations, § 1.56.

I hereby claim foreign priority benefits under Title 35, United States Code § 119 (a)-(d) or § 365(b) of any foreign application(s) for patent or inventor's certificate, or § 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of an application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) below.

Application Number(s)	Filing Date(MM/DD/YYYY)	
		<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto

SEND TO: Assistant Commissioner for Patents, Box Patent Application, Washington, D.C. 20231

DECLARATION - Utility or Design Patent Application

I hereby claim the benefit under 35 U.S.C. 120 of any United States application(s), or 365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of 35 U.S.C. 112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 C.F.R. 1.56 which became available between the filing date of the prior application and the national or PCT International filing date of this application.

U.S. Parent Application or PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)

☐ Additional U.S. or PCT International application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

As a named inventor, I hereby appoint the following registered practitioner(s) with full power of substitution and revocation, to prosecute this application, to make alterations and amendments therein, to receive the patent, and to transact all business in the Patent and Trademark Office connected therewith:

☐ Customer Number

Place Customer Number Bar Code Label here

OR

☒ Registered practitioner(s) name/registration number listed below

Name	Registration Number	Name	Registration Number
CANAVAN, Robert T.	37592	CONOVER, Michele L.	34962
DELACRUZ, Cedric G	36498	DWORETSKY, Samuel H.	27873
GARG, Rohini K	45272	GORRIE, Gregory J.	36530
ISAACSON, Thomas M.	44166	LEE, Benjamin S.	42787
LEVY, Robert B.	28234	MCGAHAN, Susan E.	35948

☒ I also appoint the following additional registered practitioner(s) named on the Registered Practitioner Information (Supplemental Sheet) (PTO/SB/02C modified by AT&T Corp.) attached hereto with full power of substitution and revocation, to prosecute this application, to make alterations and amendments therein, to receive the patent, and to transact all business in the Patent and Trademark Office connected therewith.

Direct all Correspondence to:

☐ Customer Number or Bar Code Label

(Insert Customer No. or Attach bar code label here)

or ☒ Correspondence address below

NAME	Samuel H. Dworetsky				
ADDRESS	AT&T CORP. P.O. Box 4110				
CITY	Middletown	STATE	New Jersey	ZIP CODE	07748-4110
COUNTRY	United States of America			FAX	732-368-6932

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of Sole or First Inventor		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Name	Michael Donkin		
Signature	<i>Michael A. Donkin</i>	Date	1/19/01
Citizenship	United States		
Address (line 1)	8 Derringer Drive		
Address (line 2)	Howell		
Address (line 3)	Monmouth County		
Address (line 4)	New Jersey		
Address (line 5)	USA		
Zip Code	07731		

☒ Additional Inventors are being named on the 1 separately numbered sheets attached hereto

SEND TO: Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231

DECLARATION**ADDITIONAL INVENTOR(S)**

Suppl m ntal Sh t

Pag of

Name of Additional Joint Inventor, if any:☐ A petition has been filed for this unsigned inventor

Name Jared Helm

Signature

Date

Citizenship United States

Address (line 1) 3408 Marquette Drive

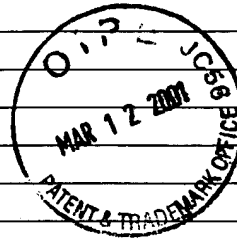
Address (line 2) High Ridge

Address (line 3) Jefferson County

Address (line 4) Missouri

Address (line 5) USA

Zip Code 63049

**Name of Additional Joint Inventor, if any:**☐ A petition has been filed for this unsigned inventor

Name Ken C. Snyder

Signature

Date

Citizenship United States

Address (line 1) 426 S. Holmes Avenue

Address (line 2) Oakland

Address (line 3) St. Louis County

Address (line 4) Missouri

Address (line 5) USA

Zip Code 63122

Name of Additional Joint Inventor, if any:☐ A petition has been filed for this unsigned inventor

Name Joseph M. Tompkins

Signature

Date

Citizenship United States

Address (line 1) 33 Nob Circle

Address (line 2) Newburgh

Address (line 3) Orange County

Address (line 4) New York

Address (line 5) USA

Zip Code 12550

Name of Additional Joint Inventor, if any:☐ A petition has been filed for this unsigned inventor

Name Virginia E. Weismantel

Signature

Date

Citizenship United States

Address (line 1) 2 Valley Road

Address (line 2) Ringwood

Address (line 3) Passaic County

Address (line 4) New Jersey


Address (line 5) USA

Zip Code 07456-2909

SEND TO: Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231

DECLARATION -- Supplemental Priority Data Sheet

Additional Foreign Applications:

Pri r Foreign Application Number(s)	Country	Foreign Filing Dat (MM/DD/YYYY)	Priority Not Claimed	Certified C py Attached?	
				YES	NO
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Additional Provisional applications:

Application Number(s)	Filing Date(MM/DD/YYYY)

Additional U.S. applications:

U.S. Parent Application or PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)

SEND TO: Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231

DECLARATION

Registered Practitioner Information (Supplemental Sheet)

Name	Registration Number	Name	Registration Number
MONKA, Gary H.	35290	NAVON, Jeffrey M	32711
RESTAINO, Thomas A.	33444	STEINMETZ, Alfred G.	22971
SZWERC, Christine	43177		



SEND TO: Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231

DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION

☐ Declaration Submitted with Initial Filing **OR** ☒ Declaration submitted after Initial Filing

Attorney Docket Number 1998-0725

First Named Inventor Michael Donkin

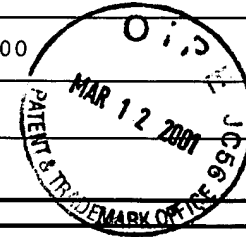
COMPLETE IF KNOWN

Application Number 09/680940

Filing Date 10/10/2000

Group Art Unit 2133

Examiner Name



As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor(if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

System And Method For Managing Dial Platform Configuration

(Title of Invention)

the specification of which

☐ is attached hereto
OR

☒ was filed on 10/10/2000 as United States Application Number or PCT International Application Number 09/680940 and was amended on (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in Title 37 Code of Federal Regulations, § 1.56.

I hereby claim foreign priority benefits under Title 35, United States Code § 119 (a)-(d) or § 365(b) of any foreign application(s) for patent or inventor's certificate, or § 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of an application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) below.

Application Number(s)	Filing Date(MM/DD/YYYY)	
		<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto

SEND TO: Assistant Commissioner for Patents, Box Patent Application, Washington, D.C. 20231

DECLARATION - Utility or Design Patent Application

I hereby claim the benefit under 35 U.S.C. 120 of any United States application(s), or 365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of 35 U.S.C. 112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 C.F.R. 1.56 which became available between the filing date of the prior application and the national or PCT International filing date of this application.

U.S. Parent Application or PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)

☐ Additional U.S. or PCT International application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

As a named inventor, I hereby appoint the following registered practitioner(s) with full power of substitution and revocation, to prosecute this application, to make alterations and amendments therein, to receive the patent, and to transact all business in the Patent and Trademark Office connected therewith:

☐ Customer Number

Place Customer Number Bar Code Label here

OR

☒ Registered practitioner(s) name/registration number listed below

Name	Registration Number	Name	Registration Number
CANAVAN, Robert T.	37592	CONOVER, Michele L.	34962
DELACRUZ, Cedric G	36498	DWORETSKY, Samuel H.	27873
GARG, Rohini K	45272	GORRIE, Gregory J.	36530
ISAACSON, Thomas M.	44166	LEE, Benjamin S.	42787
LEVY, Robert B.	28234	MCGAHAN, Susan E.	35948

☒ I also appoint the following additional registered practitioner(s) named on the Registered Practitioner Information (Supplemental Sheet) (PTO/SB/02C modified by AT&T Corp.) attached hereto with full power of substitution and revocation, to prosecute this application, to make alterations and amendments therein, to receive the patent, and to transact all business in the Patent and Trademark Office connected therewith.

Direct all Correspondence to:

☐ Customer Number or Bar Code Label

(Insert Customer No. or Attach bar code label here)

or ☒ Correspondence address below

NAME	Samuel H. Dworetsky				
ADDRESS	AT&T CORP. P.O. Box 4110				
CITY	Middletown	STATE	New Jersey	ZIP CODE	07748-4110
COUNTRY	United States of America			FAX	732-368-6932

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of Sole or First Inventor		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Name	Michael Donkin		
Signature		Date	
Citizenship	United States		
Address (line 1)	8 Derringer Drive		
Address (line 2)	Howell		
Address (line 3)	Monmouth County		
Address (line 4)	New Jersey		
Address (line 5)	USA		
Zip Code	07731		

☒ Additional Inventors are being named on the 1 separately numbered sheets attached hereto

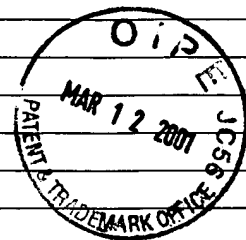
SEND TO: Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231

DECLARATION**ADDITIONAL INVENTOR(S)**

Suppl mental Sheet

Page f

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Name	Jared Helm		
Signature		Date	
Citizenship	United States		
Address (line 1)	3408 Marquette Drive		
Address (line 2)	High Ridge		
Address (line 3)	Jefferson County		
Address (line 4)	Missouri		
Address (line 5)	USA		
Zip Code	63049		
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Name	Ken C. Snyder		
Signature	<i>Ken C. Snyder</i>	Date	2/20/01
Citizenship	United States		
Address (line 1)	426 S. Holmes Avenue		
Address (line 2)	Oakland		
Address (line 3)	St. Louis County		
Address (line 4)	Missouri		
Address (line 5)	USA		
Zip Code	63122		
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Name	Joseph M. Tompkins		
Signature		Date	
Citizenship	United States		
Address (line 1)	33 Nob Circle		
Address (line 2)	Newburgh		
Address (line 3)	Orange County		
Address (line 4)	New York		
Address (line 5)	USA		
Zip Code	12550		
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Name	Virginia E. Weismantel		
Signature		Date	
Citizenship	United States		
Address (line 1)	2 Valley Road		
Address (line 2)	Ringwood		
Address (line 3)	Passaic County		
Address (line 4)	New Jersey		
Address (line 5)	USA		
Zip Code	07456-2909		



SEND TO: Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231

DECLARATION

Registered Practitioner
Information
(Supplemental Sheet)

Name	Registration Number	Name	Registration Number
MONKA, Gary H.	35290	NAVON, Jeffrey M	32711
RESTAINO, Thomas A.	33444	STEINMETZ, Alfred G.	22971
SZWERC, Christine	43177		



SEND TO: Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231

DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION

☐ Declaration Submitted with Initial Filing OR ☒ Declaration submitted after Initial Filing

Attorney Docket Number 1999-0725

First Named Inventor Michael Donkin

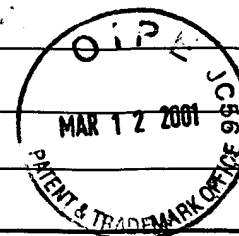
COMPLETE IF KNOWN

Application Number 09/680940

Filing Date 10/10/2000

Group Art Unit 2133

Examiner Name



As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

System And Method For Managing Dial Platform Configuration

(Title of Invention)

the specification of which

☐ is attached hereto

OR

☒ was filed on 10/10/2000 as United States Application Number or PCT International Application Number 09/680940 and was amended on (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in Title 37 Code of Federal Regulations, § 1.56.

I hereby claim foreign priority benefits under Title 35, United States Code § 119 (a)-(d) or § 365(b) of any foreign application(s) for patent or inventor's certificate, or § 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of an application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) below.

Application Number(s)	Filing Date(MM/DD/YYYY)	
		<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto

SEND TO: Assistant Commissioner for Patents, Box Patent Application, Washington, D.C. 20231

DECLARATION - Utility or Design Patent Application

I hereby claim the benefit under 35 U.S.C. 120 of any United States application(s), or 365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of 35 U.S.C. 112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 C.F.R. 1.56 which became available between the filing date of the prior application and the national or PCT International filing date of this application.

U.S. Parent Application or PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)

☐ Additional U.S. or PCT International application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

As a named inventor, I hereby appoint the following registered practitioner(s) with full power of substitution and revocation, to prosecute this application, to make alterations and amendments therein, to receive the patent, and to transact all business in the Patent and Trademark Office connected therewith:

☐ Customer Number

Place Customer Number Bar Code Label here

OR

☒ Registered practitioner(s) name/registration number listed below

Name	Registration Number	Name	Registration Number
CANAVAN, Robert T.	37592	CONOVER, Michele L.	34962
DELACRUZ, Cedric G	36498	DWORETSKY, Samuel H.	27873
GARG, Rohini K	45272	GORRIE, Gregory J.	36530
ISAACSON, Thomas M.	44166	LEE, Benjamin S.	42787
LEVY, Robert B.	28234	MCGAHAN, Susan E.	35948

☒ I also appoint the following additional registered practitioner(s) named on the Registered Practitioner Information (Supplemental Sheet) (PTO/SB/02C modified by AT&T Corp.) attached hereto with full power of substitution and revocation, to prosecute this application, to make alterations and amendments therein, to receive the patent, and to transact all business in the Patent and Trademark Office connected therewith.

Direct all Correspondence to:

☐ Customer Number or Bar Code Label

(Insert Customer No. or Attach bar code label here)

or ☒ Correspondence address below

NAME	Samuel H. Dworesky				
ADDRESS	AT&T CORP. P.O. Box 4110				
CITY	Middletown	STATE	New Jersey	ZIP CODE	07748-4110
COUNTRY	United States of America			FAX	732-368-6932

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of Sole or First Inventor		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Name	Michael Donkin		
Signature		Date	
Citizenship	United States		
Address (line 1)	8 Derringer Drive		
Address (line 2)	Howell		
Address (line 3)	Monmouth County		
Address (line 4)	New Jersey		
Address (line 5)	USA		
Zip Code	07731		

☒ Additional Inventors are being named on the 1 separately numbered sheets attached hereto

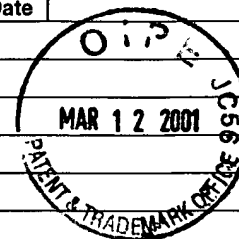
SEND TO: Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231

DECLARATION**ADDITIONAL INVENTOR(S)**

Suppl m ntal Sh et

Pag of

Name of Additional Joint Inv ntor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Name	Jared Helm		
Signature		Date	
Citizenship	United States		
Address (line 1)	3408 Marquette Drive		
Address (line 2)	High Ridge		
Address (line 3)	Jefferson County		
Address (line 4)	Missouri		
Address (line 5)	USA		
Zip Code	63049		
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Name	Ken C. Snyder		
Signature		Date	
Citizenship	United States		
Address (line 1)	426 S. Holmes Avenue		
Address (line 2)	Oakland		
Address (line 3)	St. Louis County		
Address (line 4)	Missouri		
Address (line 5)	USA		
Zip Code	63122		
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Name	Joseph M. Tompkins		
Signature		Date	1/24/01
Citizenship	United States		
Address (line 1)	33 Nob Circle		
Address (line 2)	Newburgh		
Address (line 3)	Orange County		
Address (line 4)	New York		
Address (line 5)	USA		
Zip Code	12550		
Nam of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Name	Virginia E. Weismantel		
Signature		Date	
Citizenship	United States		
Address (line 1)	2 Valley Road		
Address (line 2)	Ringwood		
Address (line 3)	Passaic County		
Address (line 4)	New Jersey		
Address (line 5)	USA		
Zip Code	07456-2909		



Joseph M Tompkins

SEND TO: Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231

Additional Foreign Applications:

[illegible]

Application Number(s)

Filing Date(MM/DD/YYYY)

--	--

**U.S. Parent Application or PCT Parent
Number**

Parent Filing Date
(MM/DD/YYYY)

Parent Patent Number
(if applicable)

--	--	--

SEND TO: Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231

DECLARATION

Registered Practitioner Information (Supplemental Sheet)

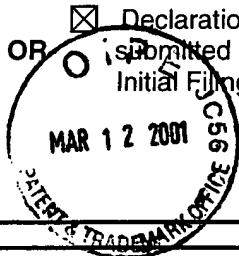
Name	Registration Number	Name	Registration Number
MONKA, Gary H.	35290	NAVON, Jeffrey M	32711
RESTAINO, Thomas A.	33444	STEINMETZ, Alfred G.	22971
SZWERC, Christine	43177		



SEND TO: Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231

DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION

☐ Declaration Submitted with Initial Filing
OR
☒ Declaration Submitted after Initial Filing



Attorney Docket Number 1999-0725

First Named Inventor Michael Donkin

COMPLETE IF KNOWN

Application Number 09/680940
Filing Date 10/10/2000
Group Art Unit 2133
Examiner Name

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

System And Method For Managing Dial Platform Configuration

(Title of Invention)

the specification of which

☐ is attached hereto

OR

☒ was filed on 10/10/2000 as United States Application Number or PCT International Application Number 09/680940 and was amended on (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in Title 37 Code of Federal Regulations, § 1.56.

I hereby claim foreign priority benefits under Title 35, United States Code § 119 (a)-(d) or § 365(b) of any foreign application(s) for patent or inventor's certificate, or § 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of an application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) below.

Application Number(s)	Filing Date(MM/DD/YYYY)	
		<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto

SEND TO: Assistant Commissioner for Patents, Box Patent Application, Washington, D.C. 20231

Attorney Docket Number: 1999-0725

DECLARATION - Utility or Design Patent Application

I hereby claim the benefit under 35 U.S.C. 120 of any United States application(s), or 365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of 35 U.S.C. 112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 C.F.R. 1.56 which became available between the filing date of the prior application and the national or PCT International filing date of this application.

U.S. Parent Application or PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)

☐ Additional U.S. or PCT International application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

As a named inventor, I hereby appoint the following registered practitioner(s) with full power of substitution and revocation, to prosecute this application, to make alterations and amendments therein, to receive the patent, and to transact all business in the Patent and Trademark Office connected therewith:

☐ Customer Number

Place Customer Number Bar Code Label here

OR

☒ Registered practitioner(s) name/registration number listed below

Name	Registration Number	Name	Registration Number
CANAVAN, Robert T.	37592	CONOVER, Michele L.	34962
DELACRUZ, Cedric G	36498	DWORETSKY, Samuel H.	27873
GARG, Rohini K	45272	GORRIE, Gregory J.	36530
ISAACSON, Thomas M.	44166	LEE, Benjamin S.	42787
LEVY, Robert B.	28234	MCGAHAN, Susan E.	35948

☒ I also appoint the following additional registered practitioner(s) named on the Registered Practitioner Information (Supplemental Sheet) (PTO/SB/02C modified by AT&T Corp.) attached hereto with full power of substitution and revocation, to prosecute this application, to make alterations and amendments therein, to receive the patent, and to transact all business in the Patent and Trademark Office connected therewith.

Direct all Correspondence to:

☐ Customer Number or Bar Code Label

(Insert Customer No. or Attach bar code label here)

or ☒ Correspondence address below

NAME	Samuel H. Dworetsky				
ADDRESS	AT&T CORP. P.O. Box 4110				
CITY	Middletown	STATE	New Jersey	ZIP CODE	07748-4110
COUNTRY	United States of America			FAX	732-368-6932

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of Sole or First Inventor		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Name	Michael Donkin		
Signature		Date	
Citizenship	United States		
Address (line 1)	8 Derringer Drive		
Address (line 2)	Howell		
Address (line 3)	Monmouth County		
Address (line 4)	New Jersey		
Address (line 5)	USA		
Zip Code	07731		

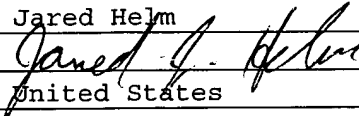
☒ Additional Inventors are being named on the 1 separately numbered sheets attached hereto

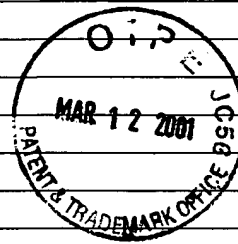
SEND TO: Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231

DECLARATION**ADDITIONAL INVENTOR(S)**

Supplemental Sheet

Page of

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Name	Jared Helm		
Signature			Date 2-20-01
Citizenship	United States		
Address (line 1)	3408 Marquette Drive		
Address (line 2)	High Ridge		
Address (line 3)	Jefferson County		
Address (line 4)	Missouri		
Address (line 5)	USA		
Zip Code	63049		
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Name	Ken C. Snyder		
Signature			Date
Citizenship	United States		
Address (line 1)	426 S. Holmes Avenue		
Address (line 2)	Oakland		
Address (line 3)	St. Louis County		
Address (line 4)	Missouri		
Address (line 5)	USA		
Zip Code	63122		
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Name	Joseph M. Tompkins		
Signature			Date
Citizenship	United States		
Address (line 1)	33 Nob Circle		
Address (line 2)	Newburgh		
Address (line 3)	Orange County		
Address (line 4)	New York		
Address (line 5)	USA		
Zip Code	12550		
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Name	Virginia E. Weismantel		
Signature			Date
Citizenship	United States		
Address (line 1)	2 Valley Road		
Address (line 2)	Ringwood		
Address (line 3)	Passaic County		
Address (line 4)	New Jersey		
Address (line 5)	USA		
Zip Code	07456-2909		



SEND TO: Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231

DECLARATION -- Supplemental Priority Data Sheet

Additional Foreign Applications:

[illegible]

Additi nal Provisional applications:

Application Number(s)	Filing Date(MM/DD/YYYY)

Additional U.S. applications:

U.S. Parent Application or PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)

SEND TO: Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231

DECLARATION

Registered Practitioner Information (Supplemental Sheet)

Name	Registration Number	Name	Registration Number
MONKA, Gary H.	35290	NAVON, Jeffrey M	32711
RESTAINO, Thomas A.	33444	STEINMETZ, Alfred G.	22971
SZWERC, Christine	43177		



SEND TO: Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231